

**SAMPLE PROGRAM/PROJECT NARRATIVE**

Title V / Maternal and Child Health (MCH)



The program/project narrative should address the following areas:

- 1. Describe the need for the proposed program/project using current and relevant data.**
2. Define the geographic area and the target population to be served, including the projected number of individuals that will be reached.
3. Describe how this program/project will coordinate or link with relevant partners.
4. Provide names and qualifications of relevant administrative, supervisory and programmatic staff who will be involved with the program/project.

**1. Describe the need for the proposed program/project using current and relevant data.**

The burden of oral disease is not uniformly distributed throughout North Dakota (ND). Access to oral health services is an ongoing concern and challenge. Vulnerable and underserved populations face a variety of barriers to oral health care including transportation issues, lack of insurance or ability to pay for care, inability to take time off work to go to the dentist or transport their children, limited availability of providers accepting Medicaid and lack of understanding of the importance of good oral health and its impact on overall health. The limited oral public health infrastructure, particularly in rural counties and lower economically impacted state regions, provides limited options for families in need. The existing oral health safety-net facilities are overburdened and cannot take on more patients without expanding their infrastructure.

Disparities in oral health exist among specific population and age groups in ND. A significantly higher proportion of minority children have decay experience, untreated tooth decay and urgent dental needs. One in six (16%) Head Start children (ages 2-4) need dental treatment (Program Information Report, 2012). One in five (21%) third-grade students (ages 8-11) assessed has untreated caries. One fourth of children with an identified special need (23%) needed other dental care beyond a preventive dental visit (Basic Screening Survey, 2010).

Racial disparities in oral health present challenges to oral health providers. American Indian children in third grade experienced more dental caries (tooth decay) than White children (81% vs. 49%). They also had more untreated dental decay (39% vs. 17%). While nearly three-fourths (74%) of American Indian children had dental sealants, rampant decay was three times more prevalent in American Indian children than in White children (29% vs. 9%) (Basic Screening Survey, 2010).

Third-grade children in rural areas were more likely to have untreated tooth decay compared to children in urban areas (28% vs. 17%). Children in schools with greater than 50 percent of children on the free and reduced-fee lunch program were more than three times as likely to have rampant tooth decay (20% vs. 6%) and were more than twice as likely to have untreated tooth decay (32% vs. 15%) compared to children in schools with less than 25 percent of children on the program (Basic Screening Survey, 2010).

**SAMPLE PROGRAM/PROJECT NARRATIVE**

Title V / Maternal and Child Health (MCH)



North Dakota adolescents are at risk for dental caries. According to the 2013 Youth Risk Behavior Survey, 47 percent of students in grades 7-8 and 54 percent of students in grades 9-12 reported to have one or more cavities in their permanent teeth. Approximately one in four middle school students (25%) and high school students (26%) reported not having had a dental visit within the previous 12 months.

**SAMPLE PROGRAM/PROJECT NARRATIVE**

Title V / Maternal and Child Health (MCH)



The program/project narrative should address the following areas:

1. Describe the need for the proposed program/project using current and relevant data.
- 2. Define the geographic area and the target population to be served, including the projected number of individuals that will be reached.**
3. Describe how this program/project will coordinate or link with relevant partners.
4. Provide names and qualifications of relevant administrative, supervisory and programmatic staff who will be involved with the program/project.

**2. Define the geographic area and the target population to be served, including the projected number of individuals that will be reached.**

Strategy 1: Integrate oral health care into overall health care.

Target populations:

- Medical and dental professionals. Three facilitated meetings will be held throughout the state in Williston, Bismarck and Grand Forks between medical and dental professionals to identify areas for collaboration (i.e., referral system to dentists for patients that present to the emergency department with dental issues). The goal will be to have 5 medical and 5 dental professionals at each meeting.
- Universities offering medical and nursing degrees. The Oral Health Program Director will work with University Administration to incorporate Smiles for Life into medical and nursing curriculums. The goal will be to have all schools incorporate Smiles for Life into their curriculums.
- The "It's All Connected" statewide media campaign will be targeted to all North Dakota citizens.

Objective 2: Leverage resources to expand the school-based sealant and fluoride varnish program.

Target populations:

- Children in grades kindergarten through six in schools with a 45 percent or higher free or reduced price lunch fee. The goal is to reach 2,000 children in the 2015-16 school year and to increase that number by 250 children each subsequent school year.

**SAMPLE PROGRAM/PROJECT NARRATIVE**

Title V / Maternal and Child Health (MCH)



The program/project narrative should address the following areas:

1. Describe the need for the proposed program/project using current and relevant data.
2. Define the geographic area and the target population to be served, including the projected number of individuals that will be reached.
- 3. Describe how this program/project will coordinate or link with relevant partners.**
4. Provide names and qualifications of relevant administrative, supervisory and programmatic staff who will be involved with the program/project.

### **3. Describe how this program/project will coordinate or link with relevant partners.**

The State Oral Health Program (OHP) will collaborate with various partners to promote medical/dental collaboration and build the oral public health infrastructure to enhance the delivery of targeted clinical preventive services and health systems changes. The focus will be on integrating oral health assessment, referral, anticipatory guidance, application of fluoride varnish in public and private health care settings, and increasing oral health literacy among chronic disease programs and also among medical professionals.

The "It's All Connected" media campaign will be implemented as an intervention tool to increase awareness and knowledge about the relationship between oral health and overall health. Oral health campaigns and promotions are effective in creating community awareness about the importance of oral health promotion to overall health and quality of life. Increasing knowledge and awareness is often the first step to supporting behavior change. Therefore, this intervention strategy may be particularly useful in helping individuals become ready to change their behaviors. A variety of partners (i.e., schools, local public health units, coalitions, worksites, etc.) will assist with determining the most appropriate routes of communication.

The Smiles for Life curriculum will be incrementally implemented in medical and nursing schools across the state to increase oral health literacy. This curriculum format can be easily implemented in an academic setting. The Smiles for Life curriculum is a comprehensive set of educational objectives based on the Accreditation Council for Graduate Medical Education (ACGME) competencies, test questions, resources for further learning, oral health web links, an implementation guide and detailed module outlines.

Seal!ND (school-based sealant and fluoride varnish program) is a program established in 2008 designed to increase access to preventive dental care to underserved populations. The program has four temporary public health hygienists that are strategically located throughout the state. Services offered with this program include: oral health screenings, oral health education, dental sealants and fluoride varnish. From 2008-2014, the Seal!ND program has provided preventive oral health services to 2,042 children. Collaboration and partnership with the Ronald McDonald Care Mobile and Bridging the Dental Gap (a safety net clinic) has been able to expand preventive oral health services, however, additional partnerships are needed to expand these services. Key partners include private practice dentists and Federally Qualified Health Centers. Fluoride varnish and sealants are best practice strategies in reducing dental decay in children.

**SAMPLE PROGRAM/PROJECT NARRATIVE**

Title V / Maternal and Child Health (MCH)



The program/project narrative should address the following areas:

1. Describe the need for the proposed program/project using current and relevant data.
2. Define the geographic area and the target population to be served, including the projected number of individuals that will be reached.
3. Describe how this program/project will coordinate or link with relevant partners.
4. **Provide names and qualifications of relevant administrative, supervisory and programmatic staff who will be involved with the program/project.**

**4. Provide names and qualifications of relevant administrative, supervisory and programmatic staff who will be involved with the program/project.**

Jane Johnson:

Jane has been the Oral Health Program Director for the North Dakota Department of Health since 2006. In this role, she is responsible for planning, developing, directing and evaluating a statewide dental health program in oral disease prevention and health promotion. Program goals are accomplished through duties related to data management, community engagement, coalition building, communications, public education, community water fluoridation efforts, dental public health interventions, public policy, strategic planning, budget management, grant writing/management and staff supervision.

Jane has extensive dental health experience. She was employed as a clinical dental hygienist in a number of states prior to moving back to North Dakota to pursue her career in dental public health. Jane received her Certification in Dental Assisting and earned an Associate of Science Degree in Dental Hygiene from the North Dakota State College of Science in Wahpeton, North Dakota. She earned her Bachelor of Arts Degree in Business Administration at the University of Sioux Falls, Sioux Falls, South Dakota.

One of Jane's greatest strengths is her ability to effectively form and maintain partnerships. She has many strong connections/partnerships at both the state and national levels and is held in high regard by her peers. Jane is currently serving as President of the Association of State and Territorial Dental Directors Board of Directors (ASTDD).